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Militime Trilighest N	umber Previoush	PEO FO	. In This 245
777	A On-densk.	Oald Ear	(Table) or bodes

(Column 1) CLAMS

REMAINING

AFTER

AMENDMENT

" If the crity in column t is less than the entry in column 2, write "O' in column 3, or if the "Righest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20," ICE is less than 3, enter "3."

Minus

Minus

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

OR ADDIT. FEE ADDIT. FEE pendant) is the highest number found in the appropriate box in column 1.

(Calumn 2)

HIGHEST

NUMBER

PREVIOUSLY

PAID FOR

PRIOR AND TOUGHRENT OFFICE, U.S. DEPARTMENT OF COMMERCE

ADOI-

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FEE

TOTAL

ADOIT, FEE

RATE

X\$ 9-

X42=

+140=

(Column 3)

PRESENT

EXTRA

OR

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OR

OR

ADDIT. FEE

RATE

XS1B-

X84=

+280=

ADDI-

TIONAL

FEE

FORM PTO-475 (Res. 601)

ENDMENT

Total

Independent.